FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Lou Della Crim#I Joint Venture	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	M ULOE
Type of Filing: New Filing Amendment	1302/107
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Anderson-Drake, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 6142 Campbell Road, Dallas, TX 75248	Telephone Number (Including Area Code) (972) 930-1100
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Oil & Gas Exploration	FO AVEN CONTRACTOR
Type of Business Organization	1 MAR 2 2 2005
	clease specify):
business trust limited partnership, to be formed	
Month Year  Actual or Estimated Date of Incorporation or Organization:	35/69
Actual or Estimated Date of Incorporation or Organization: O 3 S Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN for Canada: FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: 11th Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 17d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20:	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repothereto, the information requested in Part C, and any material changes from the information previously supplined be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for state under the Uniform Limited Offering Exemption (ULOE) for state to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption. a fee in the proper amount shall
ATTENTION	· · · · · · · · · · · · · · · · · · ·
Equipments title parties in the appropriate states will not regult in a loca of the federal or	comption. Conversaly tailure to tile the

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

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filing of a federal notice.

Each executive off	icer and director o		rect the vote or disposition corporate general and mar		f a class of equity securities of the iss partnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or
Anderson-Drake, Inc		_	_	<del>-</del>	Managing Partner
Full Name (Last name first,					
6142 Campbell Road	, Dallas, TX	75248			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
James R. Young		•			Managing Partner
Full Name (Last name first,	if individual)				
5142 Campbell Road	, Dallas, TX	75248			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	<del> </del>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)	t organization to the state of	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		and the second s
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
	(Use bla	nk sheet, or copy and use	additional copies of this s	heet, as necessary	) .

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

	, B. INFORMATION ABOUT OFFERING															
1.	Has the	issuer sold	l, or does th	ie issuer ir	ntend to se	II. to non-a	ccredited i	nvestors in	this offer	ine?		Yes [X]	№ П			
••			., 0. 0000			Appendix				_		М	Ш			
2.	What is	the minim	um investm					_			******	\$18,7	50.00			
												Yes No				
3.	Does th	e offering	permit join	ownershi	p of a sing	le unit?		~····	**********	*************	************					
4.	commis If a pers or state a broke	sion or sim on to be lis s, list the na r or dealer,	ilar remune ted is an ass ime of the b you may so	ration for s sociated pe roker or de et forth the	colicitation rson or age caler. If mo	of purchase int of a brok ore than five	ers in conne (er or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t EC and/or	irectly, any he offering, with a state ons of such					
Ful	ll Name (	Last name	first, if indi	ividual)												
Bus	siness or	Residence	Address (N	umber and	i Street, Ci	ity, State, Z	ip Code)	<del></del>	<del>* • • • • • • • • • • • • • • • • • • •</del>			<del></del>				
Naı	me of As	sociated Br	oker or De	aler						<del></del>	<del> </del>		<del> </del>			
Sta	tes in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		····				******			
	(Check	"All States	or check	individual	States)	************	************	H	••••••	************	***************************************		States			
	AL IL MT RI	AK IN NE SC	IA IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR			
Ful	l Name (	Last name	first, if indi	vidual)			<del> </del>		<del></del>		<del> </del>					
Bu	siness or	Residence	Address (1	Vumber an	d Street, C	City, State,	Zip Code)			· · · · · · · · · · · · · · · · · · ·						
Nar	me of As	sociated Br	oker or De	aler					· · · · · · · · · · · · · · · · · · ·							
Sta	tes in Wi	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		<del></del>	****	· · · · · · · · · · · · · · · · · · ·					
			or check						#*************************************	•••••••••	***********	☐ Al	States			
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]			
		IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO			
	MT	NE	NV	NH	נא	NM	NY	NC	ND	OH	OK	OR	PA			
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR			
Ful	l Name (	Last name	first, if indi	vidual)						***************************************						
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)		<del></del>							
Nar	me of As	sociated Br	oker or De	aler												
Sta	tes in Wi	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				<u> </u>	·				
	(Check	"All States	or check	individual	States)	*************		*************		**********		☐ A1	l States			
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt ......\$ Equity ......\$ ☐ Common ☐ Preferred Partnership Interests ...... Other (Specify Joint Venture Interests \$4,000,000.00 \$25,000.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number **Dollar Amount** Investors of Purchases **\$** 25,000.00 Accredited Investors 1 Non-accredited Investors Total (for filings under Rule 504 only) ...... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 Regulation A Rule 504 Total ..... Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$25,000.00 Printing and Engraving Costs..... **\$17,500.00** Legal Fees..... 7,500.00 Accounting Fees ..... Engineering Fees Sales Commissions (specify finders' fees separately)......

\$\frac{14,280.00}{64,280.00}

Other Expenses (identify) Blue Sky Filing Expenses & Fees

Total .....

***************************************	NUMBER OF INVESTORS, EXPENSES AND US	E OF PROJECTS	
nd total expenses furnished in response to Par		d gross	\$ <u>3,935,720.00</u>
ach of the purposes shown. If the amount heck the box to the left of the estimate. The	for any purpose is not known, furnish an estimatotal of the payments listed must equal the adjusted	ite and	
		Payments to Officers, Directors. & Affiliates	Payments to Others
alaries and fees			
nd equipment	·		
Construction or leasing of plant buildings a	nd facilities	S	_ 🗆 \$
ffering that may be used in exchange for the	he assets or securities of another	<b></b> □ \$	<b>□\$</b>
other (specify): Turnkey Drilling Cos	ts (including completion)	\$	=
Column Totals	***************************************	S	<u>3,935,720.00</u> <b>≤</b>
otal Payments Listed (column totals added	1)	X \$_3	3,935,720.00
	D. FEDERAL SIGNATURE		
ure constitutes an undertaking by the issue formation furnished by the issuer to any no	r to furnish to the U.S. Securities and Exchange Con-accredited investor pursuant to paragraph (b)	Commission, upon writ (2) of Rule 502.	
	Signature	_	~ S
of Signer (Print or Type)	Title of Signer (Print or Type)	3-18	00
of Signer (Frant of Type)	President		
	conceeds to the issuer."  Indicate below the amount of the adjusted greach of the purposes shown. If the amount sheck the box to the left of the estimate. The proceeds to the issuer set forth in response for the issuer set forth in response for the estimate of real estate.  Purchase of real estate	ndicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used of the purposes shown. If the amount for any purpose is not known, furnish an estimate, the to the left of the estimate. The total of the payments listed must equal the adjuster proceeds to the issuer set forth in response to Part C — Question 4.b above.  Salaries and fees	Payments to Officers, Directors. & Affiliates  Salaries and fees

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	•	E. STATE SIGNATURE								
1.		262 presently subject to any of the disqu								
		See Appendix, Column 5, for state re-	sponse.							
2.	The undersigned issuer hereby underta D (17 CFR 239.500) at such times as		Fany state in which this notice is filed a notice on Form							
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by issuer to offerees.									
4.	limited Offering Exemption (ULOE)		s that must be satisfied to be entitled to the Uniform d understands that the issuer claiming the availability on satisfied.							
	uer has read this notification and knows that the person.	ne contents to be true and has duly caused t	his notice to be signed on its behalf by the undersigned							
Issuer (	(Print or Type)	Signature /	Date							
	rson-Drake, Inc.		3-18-05							
Name (	(Print or Type)	Title Print of Type								

President

#### Instruction:

James R. Young

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				Al	PENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No .	Joint Venture Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	Х		\$4,000,000.00						х
AK	Х		\$4,000,000.00						х
AZ	Х		\$4,000,000.00						Х
AR	X		\$4,000,000.00						х
CA	Х		\$4,000,000.00	1	\$25,000.00				х
со	Х		\$4,000,000.00						X
CT	Х		\$4,000,000.00						Х
DE	X		\$4,000,000.00						x
DC	X		\$4,000,000.00						X
FL	Х		\$4,000,000.00						Х
GA	X _		\$4,000,000.00						х
ні	X		\$4,000,000.00						X
ID	X		\$4,000,000.00						Х
IL	X		\$4,000,000.00						Х
IN			·						
IA	Х		\$4,000,000.00		·				Х
KS	X		\$4,000,000.00						Х
KY	Х		\$4,000,000.00						Х
LA	Х		\$4,000,000.00						Х
ME	Х		\$4,000,000.00						X
MD	Х		\$4,000,000.00						X
MA	Х		\$4,000,000.00						Х
MI	Х		\$4,000,000.00				<u> </u>		Х
MN	х		\$4,000,000.00						X
MS	X		\$4,000,000.00						Х

#### **APPENDIX** 2 3 4 Disqualification Type of security under State ULOE and aggregate intend to sell (if yes, attach Type of investor and to non-accredited offering price explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Joint Venture Accredited Non-Accredited Interests State Yes No Investors **Investors** Amount Amount Yes No MO \$4,000,000.00 X MT \$4,000,000.00 X NE Х \$4,000,000.00 NV X \$4,000,000.00 NH \$4,000,000.00 X NJ \$4,000,000.00 X NM X X \$4,000,000.00 NY \$4,000,000.00 Х NC \$4,000,000.00 ND ОН \$4,000,000.00 OK \$4,000,000.00 OR X \$4,000,000.00 PΑ RI \$4,000,000.00 SC X \$4,000,000.00 SD TN \$4,000,000.00 TX X \$4,000,000.00 UT \$4,000,000.00 VT \$4,000,000.00 VA \$4,000,000.00 WA \$4,000,000.00 WV \$4,000,000.00 WI

				APP	ENDIX				<del></del>
ı		2	3			4			5
	to non-a	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Joint Venture Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY	Х		\$4,000,000.00						Х
PR	X		\$4,000,000.00						X